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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name  Write the name that is on	Sylvia First name E.	Israel First name
your government-issued picture identification (for example, your driver's license or passport	Middle name  Palacios  Last name	Middle name  Ramos  Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX - XX- 2902 OR 9 xx - xx-	XXX - XX- 9007 OR 9 XX - XX-

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Debtor 1 Sylvia First Name	E. Middle Name	Palacios Last Name	Case number (if known)
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any	business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name		Business name
8 years Include trade names and	Business name		Business name
doing business as names	EIN		EIN
	EIN		EIN
5. Where you live	1514 W Walton St Apt 2		If Debtor 2 lives at a different address:  1514 W Walton St Apt 2
	Number Street		Number Street
	Chicago Illino City State		Chicago Illinois 60642 City State Zip Code
	Cook County		Cook County
	If your mailing addres	ss is different from the one ote that the court will send ar alling address.	e If Debtor 2's mailing address is different from yours,
	Number Street		Number Street
	City	State Zip Code	City State Zip Code
<ol> <li>Why you are choosing this district</li> </ol>	Check one:		Check one:
to file for bankruptcy		ays before filing this petition, I honger than in any other district.	
	I have another reaso	on. Explain. (See 28 U.S.C. §§	1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	btor 1 Sylvia	E	Palacios	Case number (if kr.	no wn)
	First Name	Middle Name	Last Name		
Pa	rt 2: Tell the Court Abo	out Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief descr Bankruptcy (Form B2010)). A Chapter 7 Chapter 11 Chapter 12 Chapter 13			C. § 342(b) for Individuals Filing for opriate box.
8.	How you will pay the fee	more details about how cashier's check, or mon may pay with a credit ca  I need to pay the fee in Individuals to Pay Your  I request that my fee b judge may, but is not rethe official poverty line.	ryou may pay. Typically, ley order. If your attorned and or check with a pre-part installments. If you cher Filing Fee in Installments waived (You may required to, waive your fee that applies to your fame, you must fill out the Aprice of the content of of th	, if you are paying the year is submitting your printed address.  coose this option, signs (Official Form 10) west this option online, and may do so or illy size and you are	the clerk's office in your local court for the fee yourself, you may pay with cash, or payment on your behalf, your attorney and attach the <i>Application for</i> 3A).  If you are filing for Chapter 7. By law, a sally if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9.	Have you filed for bankruptcy within the last 8 years?	Ves. District District District	V	Vhen	Case number  Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District		When	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	✓ No. Go to line			ost You (Form 101A) and file it with

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E **Palacios** Debtor 1 Sylvia Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Sylvia E. Palacios Case number (if known)
First Name Middle Name Last Name

Pa	rt 5: Explain Your Effor	rts to Receive a Brie	fing About Credit Counseling			
		About Debtor 1:		Abo	out Debtor 2 (Sp	oouse Only in a Joint Case):
15.	Tell the court	You must check one:		You	must check one:	
	whether you have received briefing about credit counseling.	counseling agen	ing from an approved credit icy within the 180 days before I ptcy petition, and I received a npletion.		counseling ager	fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a mpletion.
	The law requires that you receive a briefing		he certificate and the payment plan, veloped with the agency.			the certificate and the payment plan, eveloped with the agency.
about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file	counseling agen	ing from an approved credit acy within the 180 days before I ptcy petition, but I do not have a appletion.		counseling ager	fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion.	
		er you file this bankruptcy petition, opy of the certificate and payment			ter you file this bankruptcy petition, copy of the certificate and payment	
are not eligible to file.  If you file anyway, the court can dismiss your case, you will lose whatever filing fee you		from an approve obtain those ser made my reques	ked for credit counseling services ad agency, but was unable to vices during the 7 days after I t, and exigent circumstances emporary waiver of the		from an approve obtain those ser made my reques	ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the
credi colle	paid, and your creditors can begin collection activities again.	requirement, attac efforts you made t unable to obtain it	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		requirement, atta efforts you made unable to obtain i	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this
			e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.	,		e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.
		receive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.	1	receive a briefing must file a certifica with a copy of the	sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. o, your case may be dismissed.
		•	he 30-day deadline is granted only mited to a maximum of 15 days.		,	the 30-day deadline is granted only mited to a maximum of 15 days.
		I am not required counseling beca	d to receive a briefing about credit use of:		l am not require counseling beca	d to receive a briefing about credit ause of:
		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty.	I am currently on active military duty in a military combat zone.		Active duty.	I am currently on active military duty in a military combat zone.
		about credit coun	are not required to receive a briefing seling, you must file a motion for ounseling with the court.		about credit cour	are not required to receive a briefing seling, you must file a motion for ounseling with the court.

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Debtor 1 Sylvia First Name		Palacios	Case number (if known)	
	estions for Reporting Purposes	Zast Harris		
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individua No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily money for a business or i No. Go to line 16c. Yes. Go to line 17.  16c. State the type of debts you	r consumer debts? Consumer debts? Consumer debts? Consumer debts? Consumer debts? Business debts? Business debts? Business debts?	al, family, or household siness debts are debts th the operation of the bus	purpose."  nat you incurred to obtain siness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that	r 7. Do you estimate that	after any exempt propert distribute to unsecured cr	y is excluded and administrative reditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,00 5,001-10,0 10,001-25,	00	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,00 \$50,000,00	-\$10 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,00 \$50,000,00	-\$10 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	Lhave aversined this patition a	nd I dodara under non	alty of parium, that the	nformation provided is true and
For you	correct.  If I have chosen to file under Cl of title 11, United States Code under Chapter 7.  If no attorney represents me an out this document, I have obtain I request relief in accordance we I understand making a false state connection with a bankruptcy of	napter 7, I am aware the I understand the relied I did not pay or agreened and read the notice ith the chapter of title attement, concealing precase can result in finest	at I may proceed, if eligi f available under each che e to pay someone who i be required by 11 U.S.C. 11, United States Code operty, or obtaining mo	ble, under Chapter 7, 11,12, or 13 napter, and I choose to proceed s not an attorney to help me fill . § 342(b).
	both. 18 U.S.C. §§ 152, 1341,	1519, and 35/1.	•	
	/s/ Sylvia Palacios Signature of Debtor 1		/s/ Israel Ramo Signature of Debte	
	Executed on 1/5/2018 MM / DI	D/YYYY	Executed on _	1/5/2018 MM / DD / YYYY

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Debtor 1 Sylvia	E.	Palacios	Case number (if k	rnown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12	or 13 of title 11, United	ave informed the debtor(s) about I States Code, and have explained the Iso certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 3	42(b) and, in a case in w	hich § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the ir	nformation in the schedu	ules filed with the petition is incorrect.
attorney, you do not				·
need to file this page.	/s/ Jason Diaz		Date	1/5/2018
	Signature of Attorney	for Debtor	M	M / DD / YYYY
	,			
	Jason Diaz			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
				•
	Contact phone	3129130625	Email address	jdiaz@semradlaw.com
	Dayaranahan		Illinois	
	Bar number		State	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Sylvia	E.	Palacios
	First Name	Middle Name	Last Name
Debtor 2	Israel		Ramos
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

Check if	this	is	an
amende	d filir	ng	

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$10,451.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$10,451.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$14,040.00
s. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$24,086.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$5,643.01
Your total liabilities	\$43,769.01
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$2,868.60
	φ2,000.00
Copy your combined monthly income from line 12 of Schedule I	

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Palacios Debtor 1 Sylvia \_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,566.17 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$24,086.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$24,086.00

9g. Total. Add lines 9a through 9f.

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Fill in this	s information	n to identify your c	ase:				
Debtor 1	Sylvi	a	E.	Palacios			
Dalata		Name	Middle N		ne		
Debtor 2 (Spouse, if t		Name	Middle N	Ramos lame Last Nar	ne		
United St	tates Bankru	ptcy Court for the:	Northern	District of Illin			
Case nur	mber			(Sta	ate)		
(If known)							Chapte if this is an
-		106A/B					Check if this is an amended filing
Sche	dule A	/B: Prope	rty				12/
responsib write you Part 1:	ole for suppl or name and Describe	ying correct infor case number (if k Each Residenc	mation. If more s nown). Answer e e, Building, Lar	pace is needed, attach	a separate sheet to thi		• •
<b>✓</b>	No. Go to	Part 2					
	Yes. Where	e is the property?					
1.1	Street addr	ress, if available, or	other description	What is the property? Single-family home Duplex or multi-unit Condominium or co	t building poperative	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
	Number	Street State	Zin Codo	Land Investment property Timeshare Other	,	Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
	Oity	State	Zip Code	Who has an interest in one.  Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the co	or 2 only	(see instructions)	ommunity property
				property identification		item, such as local	
If you		ress, if available, or		What is the property? Single-family home Duplex or multi-unit	t building	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the
				Condominium or co	·	entire property?	portion you own?
	Number	Street State	Zip Code	Investment property Timeshare Other		Describe the nature of interest (such as fee stee the entireties, or a life	simple, tenancy by
						Check if this is co	ommunity property

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 and Debtor 2 only

property identification number:

Debtor 1 only
Debtor 2 only

Who has an interest in the property? Check

At least one of the debtors and another

Other information you wish to add about this item, such as local

(see instructions)

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Debtor 1	Sylvia First Name	E. Middle Name	Palacios Last Name	Case number	(if known)	
	et address, if available, or oth		Vhat is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	ply.	the amount of any secu	•
City	State	] ] ]	Timeshare Other  Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth	ner	Check if this is co (see instructions)	
you ha Part 2: Do you own t 3. Cars, va	Describe Your Vehicles vn, lease, or have legal or e hat someone else drives. If yours, trucks, tractors, sport util	tion you own for a te that number ho	in any vehicles, whether they are realso report it on Schedule G: Executory	gistered or no	t? Include any vehicles	
Ye 3.1	s	Hyundai Elantra 2012 117000	Who has an interest in the prope one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?  \$7350.00
3.2	Make Model: Year: Approximate mileage: Other information:		who has an interest in the prope one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions)	rty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?

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	Sylvia First Name	E. Middle Name	Palacios Last Name	Case numbe	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)	nly rs and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Desired claims Secured by Property.  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communication.	nly rs and another	the amount of any secu	claims or exemptions. Putered claims on Schedule Elims Secured by Property.  Current value of the portion you own?
	mples: Boats, trailers, motor	•	recreational vehicles, other fishing vessels, snowmobiles,	•		
4.1			Who has an interest in the one.	property? Check		claims or exemptions. Pu
4.1	Yes		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communication.	nly rs and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Inims Secured by Property.  Current value of the portion you own?
	Yes  Make  Model: Year: Approximate mileage:		one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 or  At least one of the debtor	nly rs and another nity property (see property? Check	the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule in ims Secured by Property.  Current value of the

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De	ebtor 1	Sylvia First Name	E. Middle Name	Palacios Last Name	Case number (if known)	
Pa	rt 3:		our Personal and Household			
D	o you	own or hav	e any legal or equitable inte	rest in any of the following	g items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
		-	and furnishings liances, furniture, linens, china, kitc	henware		
V		Describe	Used living room furniture/bedroon	n furniture		\$800.00
		tronics les: Televisions	s and radios; audio, video, stereo, a	and digital equipment; compute	ers, printers, scanners; music	
V	Yes. [	Describe	Cellular Phones (2)/Televisions (2)/			\$500.00
	Examp	•	ue and figurines; paintings, prints, or o in, or baseball card collections; oth		=	
	No Yes. [	Describe				
		les: Sports, ph	rts and hobbies otographic, exercise, and other holes; carpentry tools; musical instruments		ables, golf clubs, skis; canoes	
✓	No	,				
	Yes. [	Describe				
	<b>0. Fire</b> Examp		es, shotguns, ammunition, and rela	ated equipment		1
✓	No					
Ш	Yes. L	Describe				
	-		clothes, furs, leather coats, designe	er wear, shoes, accessories		-
Ц	No Vac I	Dogarih o	Lland Olade's s			1
⊻	res. L	Describe	Used Clothing			\$400.00
		-	ewelry, costume jewelry, engageme er	ent rings, wedding rings, heirloc	om jewelry, watches, gems,	
$ \mathbf{V} $	No Yes. [	Describe	Costume Jewelry			\$300.00
		n-farm animal les: Dogs, cats	s, birds, horses			1
✓	No					
	Yes. [	Describe				
_	<b>4. Any</b> No	other person	al and household items you did	not already list, including an	y health aids you did not list	-
뇓		Describe				1
Ш	ı cə. L	20301106				
			lue of all of your entries from Pa number here	art 3, including any entries fo	r pages you have attached	\$2000.00

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Debtor 1 Sylvia Palacios Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: TCF BANK \$400.00 17.1. Checking account: <u>\$</u>0.00 17.2. Checking account: Bank of America 17.3. Savings account: TCF BANK \$100.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Debt	tor 1 Sylvia	E.	Palacios	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · <u></u>	
20.	Negotiable instruments i	orate bonds and other negotials include personal checks, cashiers ents are those you cannot transfer Issuer name:	checks, promissory not	tes, and money orders.	
21.	Retirement or pension Examples: Interests in IF		, thrift savings accounts	, or other pension or profit-sharing plans	
	√ No	, , , , , , , , , , , , , , , , , , , ,	,	, , , , , , , , , , , , , , , , , , , ,	
		Type of account:	Institution name:		
	Yes. List each account separately.	401(k) or similar plan:			
	зерагатегу.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	✓ Yes	Electric:	Security Deposit w/ La	ndliord	\$600.00
		Gas:	_		
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No ☐ Yes	Issuer name and description:			
					,

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Debt	tor 1 Sylvia	E.	Palacios	Case number (if known)	
0.4	First Name	Middle Name	Last Name		
24.		ucation IRA, in an account in (1), 529A(b), and 529(b)(1).	ı a qualified ABLE program, or unde	r a qualified state fultion program.	
	✓ No ☐ Yes	tution name and description. Se	eparately file the records of any interest	s.11 U.S.C. § 521(c):	
25.	Trusts, equitable	or future interests in property	y (other than anything listed in line	1), and rights or powers	
	exercisable for yo	ur benefit			
	Yes. Describe				
26.			s, and other intellectual property eeds from royalties and licensing agree	ements	
	No Yes. Describe				
	<u> </u>				
27.		es, and other general intang permits, exclusive licenses, coo	ibles operative association holdings, liquor li	censes, professional licenses	
	✓ No  Yes. Describe				
Mor	ney or property o	wed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or property of Tax refunds owed t				portion you own? Do not deduct secured
	Tax refunds owed t				portion you own? Do not deduct secured
	Tax refunds owed t  No Yes. Give specif	o you ic information		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to No Yes. Give specification about there you alread	o you		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to No Yes. Give specification about there you alread	o you ic information n, including whether y filed the returns			portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds owed to No Yes. Give specification about ther you alread and the tate  Family support  Examples: Past due	ic information n, including whether y filed the returns x years	support, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to No Yes. Give specification about their you alread and the tate.  Family support Examples: Past due.	ic information n, including whether y filed the returns x years	support, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to No Yes. Give specification about their you alread and the tate.  Family support Examples: Past due.	ic information n, including whether y filed the returns x years	support, child support, maintenance,	State:  Local:  divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to No Yes. Give specification about their you alread and the tate.  Family support Examples: Past due.	ic information n, including whether y filed the returns x years	support, child support, maintenance,	State:  Local:  divorce settlement, property settlemen  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds owed to No Yes. Give specification about their you alread and the tate.  Family support Examples: Past due.	ic information n, including whether y filed the returns x years	support, child support, maintenance,	State: Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to No Yes. Give specification about their you alread and the tate to the samples: Past due No Yes. Give specification in the samples: Past due	ic information n, including whether y filed the returns x years	support, child support, maintenance,	State:  Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds owed to No Yes. Give specification about their you alread and the tax  Family support Examples: Past due No Yes. Give specification of the support in the suppo	ic information n, including whether y filed the returns x years  or lump sum alimony, spousal ic information	ents, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to No Yes. Give specification about their you alread and the tax  Family support Examples: Past due No Yes. Give specification of the support in the suppo	ic information n, including whether y filed the returns x years  or lump sum alimony, spousal ic information	ents, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Debt	tor 1 Sylvia	E.	Palacios	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance Examples: Health, disa		alth savings account (HSA); credit, h	omeowner's, or renter's insurance	
	Yes. Name the instruction of each policy and		Company name:	Beneficiary:	Surrender or refund value:
32.			someone who has died proceeds from a life insurance police	, or are currently entitled to receive	
	☐ No				
	Yes. Describe	Potential Life ins policy fr	om biological mother		
	\$1.00				
33.			you have filed a lawsuit or made	a demand for payment	
	Examples: Accidents, e	mpioyment disputes, inst	urance claims, or rights to sue		
	<b>✓</b> No				
	Yes. Describe				
34.		l unliquidated claims of	every nature, including countered	laims of the debtor and rights	
	to set off claims				
	<b>✓</b> No				
	Yes. Describe				
	_				
35	Any financial assets y	ou did not already list			
		, ou und mot un ouu, mot			
	✓ No				
	Yes. Describe				
36.		-	n Part 4, including any entries fo	. •	\$1101.00
	ioi i ait 7. Wille tilat	number here			
Part	5: Describe Any B	Rusiness-Related Pro	nerty You Own or Have an Ir	nterest In. List any real estate in Part	1
			terest in any business-related pro		••
		, g or oquitable III			urrent value of the
	No. Go to Part 6.				ortion you own?
	Yes. Go to line 38				o not deduct secured claims rexemptions
38.	Accounts receivable	or commissions you alre	eady earned	Ū	
	<b>√</b> No				
	Yes. Describe				
00	0#100 cmilmon 1 :	minhiman and a collection			
39.		nishings, and supplies lated computers, software	, modems, printers, copiers, fax ma	ichines, rugs, telephones, desks, chairs, electi	ronic devices
	No No				
	Yes. Describe				

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Deb	tor 1 Sylvia	E	Palacios	Case number (if known)	
	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, e	equipment, supplies you u	se in business, and tools of you	r trade	
	<b>✓</b> No				
	Yes. Describe				
	_				
41.	Inventory				
	<b>✓</b> No				
	Yes. Describe				
	_				
40		ina ay iaint wantuwa			
42.	Interests in partnersh	iips or joint ventures			
	<b>✓</b> No		Name of entity:	% of ownership:	
	Yes. Give specific	'	value of entity.	70 Of Ownership.	
	information about them	-		<del></del>	· ·
	шеш				
		<del>-</del>			
40	O	-			
43.	Customer lists, mailing	lists, or other compilation	ons		
	<b>✓</b> No				
	Yes. Do your lists i	nclude personally identifiabl	e information (as defined in 11 U.	S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	ribo			
	les. Desc				
44.	Any business-related	property you did not alrea	ady list		
	✓ No				
	lacksquare	·-			<del>_</del>
	Yes. Give specific information				
	inomation	-			<del>_</del>
		·-			<del>-</del>
		<u>-</u>			<u> </u>
		<del>-</del>			<del>_</del>
		· <del>-</del>			
			rt 5, including any entries for p		
or Pa	art 5. Write that numbe	er nere			
Part	6: Describe Any F	arm- and Commercial	Fishing-Related Property	You Own or Have an Interest In.	
	If you own or have ar	interest in farmland, list it in	Part 1.		
46.	Do you own or have a	ny legal or equitable inte	rest in any farm- or commercia	I fishing-related property?	
	No. Go to Part 7.				Current value of the
					portion you own?
	Yes. Go to line 47.	•			Do not deduct secured claims or exemptions
47	Farm animals				or oxemptions
77.	Examples: Livestock, p	oultry, farm-raised fish			
	No No				
	<u> </u>				
	Yes. Describe				

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Deb	tor 1 Sylvia	E	Palacios	Case number (if known)	
	First Name	Middle Name	Last Name		
48.	Crops-either growing	or harvested			
	<b>✓</b> No				
	Yes. Describe				
49.	Farm and fishing equip	oment, implements, machinery, fi	xtures, and tools of trad	e	
	No No	, , , , , , , , , , , , , , , , , , , ,	,		
	<u> </u>				
	Yes. Describe				
50.	Farm and fishing supp	lies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51	Any farm- and comme	 rcial fishing-related property you	did not already list		
31.		rolai lisiliig-related property you	did not alleady list		
	No No				
	Yes. Describe				
52 A	dd the dellar value of a	ll of your entries from Part 6, incli	iding any entries for na	ros vou bavo attached	
		r here		-	<del></del>
•				L	
Part	7: Describe All Pro	perty You Own or Have an In	terest in That You Di	d Not List Above	
53.		perty of any kind you did not alrea s, country club membership	idy list?		
		s, country club membersmp			
	✓ No				
	Yes. Give specific information				
					·
E4 A		II of very entries from Dout 7. Writ	a that mumbay bays		
54. A	dd the dollar value of a	II of your entries from Part 7. Writ	e that number here		,
Part	8: List the Totals of	Each Part of this Form			
55 1	Part 1: Total real estate	, line 2		•	
33.1	art I. Total leal estate	, IIIC Z			
56. [	part 2 total vehicles, lin	e 5	\$7350.00		
57 E	Part 3: Total personal ar	nd household items, line 15	\$7330.00	<u> </u>	
	-		\$2000.00	<u></u>	
58. <b>F</b>	Part 4: Total financial as	ssets, line 36	\$1101.00	<u></u>	
59. I	Part 5: Total business-re	elated property, line 45			
60. I	Part 6: Total farm- and	fishing-related property, line 52		<del>_</del>	
				<u> </u>	
	Part 7: Total other prop	-			
62.	Total personal property.	. Add lines 56 through 61	\$10451.00	_	+ \$10451.00
				Copy personal property total ▶	
					\$10451.00
63. <b>T</b>	otal of all property on S	Schedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:						
Debtor 1	Sylvia	E.	Palacios			
	First Name	Middle Name	Last Name			
Debtor 2	Israel		Ramos			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)				—		

#### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	t 1: Identify the Property You Claim	n as Exempt					
1.	Which set of exemptions are you claiming	ng? Check one only, ev	ren if your spouse is filing with you.				
	You are claiming state and federal r	onbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)				
	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/	B that you claim as e	xempt, fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this	Current value of	Amount of the exemption you claim	Specific laws that allow exemption			
	property	the portion you own	Check only one box for each exemption.				
		Copy the value from Schedule A/B					
	Brief			735 ILCS 5/12-1001(a)			
	description:	\$400.00	\$400.00				
	Used Clothing		100% of fair market value, up to any	-			
	Line from Schedule A/B: 11		applicable statutory limit				
	Brief description:	\$7,350.00		735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)			
	Hyundai Elantra, 2012	Ψ7,000.00	\$0	3/12-1001(b)			
	Line from Schedule A/B: 03		100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and ever	ry 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?				

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E. Palacios Debtor 1 Sylvia Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$400.00 description: **✓** \$400.00 Checking account, TCF 100% of fair market value, up to any **BANK** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$0.00 description: \$0 Checking account, Bank 100% of fair market value, up to any of America applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief description: \$100.00 **V** \$100.00 Savings account, TCF 100% of fair market value, up to any BANK applicable statutory limit Line from Schedule A/B: 17 Brief 735 ILCS 5/12-1001(b) description: \$800.00 **✓** \$800.00 Used living room 100% of fair market value, up to any furniture/bedroom applicable statutory limit furniture Line from Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$500.00 description: **✓** \$500.00 **Cellular Phones** 100% of fair market value, up to any (2)/Televisions (2)/ applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$300.00 description: **|** \$300.00 **Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$600.00 description: **✓** \$600.00 Electric, Security 100% of fair market value, up to any Deposit w/ Landliord applicable statutory limit Line from Schedule A/B:

Brief description:

Line from Schedule A/B:

Potential Life ins policy

from biological mother

32

\$1.00

100% of fair market value, up to any

applicable statutory limit

\$1.00

735 ILCS 5/12-1001(b)

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			Do	cument Page 22	2 of 69			
Fill in	this inforr	mation to identify your ca	se:					
Debto	r 1	Sylvia First Name	E. Middle Name	Palacios Last Name	_			
Debto (Spouse	r 2 e, if filing)	Israel First Name	Middle Name	Ramos Last Name				
		ankruptcy Court for the:	Northern	District of Illinois (State)	_			
Case I	number n)				_			
Offi	cial	Form 106D						Check if this is an amended filing
Scł	nedu	le D: Credito	ors Who Hav	ve Claims Sec	ured	by Prop	erty	12/15
name a 1. [	ond case Oo any c No. C	number (if known). reditors have claims se	ecured by your properloit this form to the court v	nber the entries, and attach  ty?  vith your other schedules. Yo		·		ges, write your
Part 1		All Secured Claims						
2.	separatel	y for each claim. If more th	nan one creditor has a part	ured claim, list the creditor ticular claim, list the other credi order according to the creditor	tors Amo	ounn A  bunt of claim  not deduct the e of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	TTL FIN Creditor's 4530 S	Name <b>Archer Ave</b>	2012 Hyundai Elantra	that secures the claim: , the claim is: Check all that a		14,040.00	\$7,350.00	\$6,690.00
		State ZIP Code es the debt? Check one. tor 1 only	Unliquidated Disputed  Nature of lien. Check a	all that apply.				
	Deb	tor 2 only tor 1 and Debtor 2 only ast one of the debtors	car loan)	made (such as mortgage or se as tax lien, mechanic's lien) a lawsuit	cured			

Other (including a right to offset) \_

Last 4 digits of account number \_\_

Add the dollar value of your entries in Column A on this page. Write that number

Check if this claim relates

to a community debt
Date debt was

here:

incurred

6580

\$14,040.00

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Fill in the	his inforr	mation to identify you	r case:					
Debtor	1	Sylvia	E.	Palacios				
Dobtor	0	First Name	Middle Name	Last Name				
Debtor (Spouse,		Israel First Name	Middle Name	Ramos Last Name				
United	States B	ankruptcy Court for th	e: Northern	District of Illinois (State)				
Case n				(Glate)				
Offic	ial F	orm 106E/F			•	Chec	k if this is ar	amended filing
Sch	edu	ule E/F: Cr	reditors Wh	o Have Unsecure	d Claims	;		12/1
other part 1: Claims the enticknown) Part 1: 1. Description	arty to a 06A/B) a that are ries in th  List A o any cr	any executory contra and on Schedule G: E I listed in Schedule D he boxes on the left. All of Your PRIORI	cts or unexpired leases t Executory Contracts and D: Creditors Who Hold Cla		executory contract 3). Do not include ce is needed, cop	is on <i>Schedul</i> any creditors / the Part yoເ	e <i>A/B: Prop</i> with partia ı need, fill i	perty (Official ally secured t out, number
lis As Co	ist all of sted, ider s much a ontinuati	ntify what type of claim as possible, list the clai ion Page of Part 1. If m	it is. If a claim has both pi ims in alphabetical order ac nore than one creditor hold	as more than one priority unsecured clain riority and nonpriority amounts, list that coording to the creditor's name. If you has a particular claim, list the other creditor ns for this form in the instruction bookle	claim here and show we more than two p s in Part 3.	both priority	and nonprio	rity amounts.
,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		,	Total	Priority	Nonpriority
2.1	II NEDT	OF HEALTHCARE c/o	Margaret Flores			<b>claim</b> \$0.00	\$0.00	amount \$0.00
	Springfie City Who inc Deb Deb At le	Street  State State State Stor 1 only Stor 2 only Stor 1 and Debtor 2 onle State one of the debtors	y and another es to a community debt	Last 4 digits of account number	<b>1:</b> u owe the			
	ILLINOIS Priority C	S DCFS Creditor's Name		- Last 4 digits of account number _	0000	<u>\$24,086.0</u> 0	\$0.00	<u>\$24,086.0</u> 0
	509 Ś 61			When was the debt incurred?	7/2002			
	Deb Deb Deb At le	FIELD Illinois State surred the debt? Chector 1 only tor 2 only tor 1 and Debtor 2 onleast one of the debtors	y and another es to a community debt	As of the date you file, the claim is apply.  Contingent  Unliquidated Disputed  Type of PRIORITY unsecured claim  Domestic support obligations  Taxes and certain other debts you government  Claims for death or personal injurintoxicated Other. Specify	<b>1:</b> u owe the			

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Debte	or 1	Sylvia	E.	Palacios	Case number (if known)	
		First Name	Middle Name	Last Name		
Part		List All of Your NONPRIO				
Į	Do a	any creditors have nonpriority  No. You have nothing to repo  Yes.	_	-	court with your other schedules.	
t I	unse f me	ecured claim, list the creditor sep	arately for each claim. I	or each claim lis	of the creditor who holds each claim. If a creditor has more sted, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill our	cluded in Part 1.
						Total claim
4.1	No	D ASTRA RECOVERY SERV conpriority Creditor's Name 330 W 33RD ST N STE 118			Last 4 digits of account number	\$837.00
	Νι	umber Street			As of the date you file, the claim is: Check all that apply.	
	Ci	ty State ho incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Zip Cod	de l	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or	
		At least one of the debtors and	d another		divorce that you did not report as priority claims	
		Check if this claim relates t	to a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	ls ✓	the claim subject to offset? No Yes			Other. Specify CASH 133	
4.2	Ar	merican InfoSource LP as agent t	for Directv, LLC		Last 4 digits of account number	\$0.00
		onpriority Creditor's Name O Box 51178			When was the debt incurred?	
	_	umber Street				
	c/(	o Amanda Matchett			As of the date you file, the claim is: Check all that apply.  Contingent	
	1.0	os Angeles Califor	nia 90051		Unliquidated	
	Ci	•	Zip Cod	de	Disputed	
	W	<b>ho incurred the debt?</b> Check on Debtor 1 only	one.		Type of NONPRIORITY unsecured claim:	
	F	Debtor 2 only			Student loans	
		Debtor 1 and Debtor 2 only			Obligations arising out of a separation agreement or	
		At least one of the debtors and	d another		divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	F	⊒ ☐ Check if this claim relates t	o a community debt		debts Nation Only	
	L Is	the claim subject to offset?			Other. Specify Notice Only	
	<b>✓</b>	<b>∕</b> No				
		Yes				
4.3		ty of Chicago Parking			Last 4 digits of account number	\$1,000.00
		onpriority Creditor's Name 21 N. LaSalle St # 107A			When was the debt incurred?n/a	
	Νι	umber Street			As of the date you file, the claim is: Check all that apply.	
	_				Contingent	
	Cł	nicago Illinois	60602		Unliquidated	
	Ci	ty State	Zip Cod	de	Disputed	
	ř	ho incurred the debt? Check on Debtor 1 only	one.		Type of NONPRIORITY unsecured claim:	
	F	Debtor 2 only		ļ	Student loans	
	<u> </u>	Debtor 1 and Debtor 2 only			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	F	At least one of the debtors and	d another		Debts to pension or profit-sharing plans, and other similar	
	F	Check if this claim relates t	to a community debt		debts  Other. Specify Other	
	ls	the claim subject to offset?			<u> </u>	
		No Yes				

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**Palacios** Debtor 1 Sylvia E Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Other Is the claim subject to offset? **✓** No Yes CONVERGENT OUTSOURCING \$293.00 6657 Last 4 digits of account number \_\_\_ Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 When was the debt incurred? 6/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent 77043 Houston Texas Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: **✓** No COMCAST Other, Specify Yes Dish Network 4.6 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 9601 S Meridian Blvd Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 80112 Englewood Colorado City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_ Notice Only Is the claim subject to offset?

✓ No Yes

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**Palacios** Debtor 1 Sylvia E Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 ENHANCED RECOVERY CO L \$88.00 Last 4 digits of account number 8783 Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 9/2017 As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: PEOPLE Other. Specify GAS LIGHT AND COKE COMP Yes Municipal Services Bureau \$3,025.01 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 16755 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 78761 Austin Texas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Chicago Housing Authority Is the claim subject to offset? **✓** No Yes Norwegian American Hospital 4.9 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 1044 N Francisco Ave When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60622 Chicago City Zip Code State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No ✓ Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify \_

Medical

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**Palacios** Debtor 1 Sylvia Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Peoples Gas Light & Coke Co. \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 E. Randolph St. Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ Other Is the claim subject to offset? **✓** No Yes Presence Saint Joseph Medical Center \$0.00 4.11 Last 4 digits of account number \_ Nonpriority Creditor's Name 2900 N Lake Shore Dr When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60657 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Medical Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.12 Rush Medical \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1700 W Van Buren n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60612 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Medical Is the claim subject to offset? **✓** No

Yes

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**Palacios** Debtor 1 Sylvia Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Sprint Corp. \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 7949 As of the date you file, the claim is: Check all that apply. Attn Bankruptcy Dept Contingent Unliquidated 66207 Overland Park Kansas City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Notice Only Is the claim subject to offset? **✓** No Yes St Elizabeth Hospital \$0.00 4.14 Last 4 digits of account number \_ Nonpriority Creditor's Name 1431 N Western Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60622 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Medical Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.15 St Marys Hospital \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2233 W Division St n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60622 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Medical Is the claim subject to offset? **✓** No

Yes

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Palacios Case number (if known)

1110011401	no madio name			
Part 4: Add th	e Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes only	/. 28 U.S.C. §15
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$24,086.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$24,086.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$5,643.01	
	6j. Total. Add lines 6f through 6i.	6j.	\$5,643.01	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Sylvia	E.	Palacios
	First Name	Middle Name	Last Name
Debtor 2	Israel		Ramos
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Illinois (State)
Case number			(State)

### Official Form 106G

### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Debtor 1	Sylvia	E.	Palacios	
	First Name	Middle Name	Last Name	
Debtor 2	Israel		Ramos	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number				

Check if this is an amended filing

### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if wn). Answer every question.
1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  No Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.
	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No
	Yes. In which community state or territory did you live? Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent  Number Street
	City State Zip Code
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.
	Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:

	Case 18-003		cument	Page 32	of 69	10.44.30	Desc Ma	.111
Fill in this info	ormation to identify	your case:						
Debtor 1  Debtor 2 (Spouse, if filing)	First Name Middle Name		Palacios Last Nam Ramos Last Nam			Check if this is:		
United States E the: Case number (If known)	Bankruptcy Court for	Northern	District of Illinois (State)			A supplement showing post-petition chap expenses as of the following date:  MM / DD / YYYY		
	orm 106l e I: Your In	come						12/15
responsible for information a spouse. If monumber (if kn	or supplying correct bout your spouse.		e married and d d your spouse	not filing jo is not filing	intly, and you with you, do	r spouse is liv not include ir	ing with you formation al	, include oout your
1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional		Employment status  Occupation	Debtor 1  ✓ Employed  Not Employed			Debtor 2  ✓ Employed  Not Employed		
self-employ Occupation	t time, seasonal, or red work.  may include student aker, if it applies.	Employer's name Employer's address	Monterrey Security Consultants  2232 South Blue Island Avenue  Number Street			Cenveo  200 First Stamford Place  Number Street		
5. Homome	a.c., ii ii appiioo.	How long employed there?	Chicago City	Illinois State	60608 Zip Code	Stamford City	Connecticu State	t 06902 Zip Code
Estimate mo	s you are separated.	Monthly Income the date you file this form e more than one employer,	-				•	

2. List monthly gross wages, salary, and commissions (before all payroll

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

deductions.) If not paid monthly, calculate what the monthly wage would

For Debtor 2 or

non-filing spouse

\$1,954.94

+ \$0.00

\$1,954.94

For Debtor 1

\$429.00

+ \$0.00

\$429.00

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Debto	or 1Sylvia First Name		Palacios _ast Name	Case number known)			
		dato Nae		For Debtor 1	For Debtor 2 or non-filing spouse		
Cop	y line 4 here		<b>→</b> 4.	\$429.00	\$1,954.94		
5. List	all payroll ded						
5a.	Tax, Medicare,	and Social Security deductions	5a.	\$35.32	\$284.29		
5b.	Mandatory cor	ntributions for retirement plans	5b.	\$0.00	\$0.00		
5c.	Voluntary cont	ributions for retirement plans	5c.	\$0.00	\$0.00		
5d.	Required repa	yments of retirement fund loans	5d.	\$0.00	\$0.00		
5e.	Insurance		5e.	\$0.00	\$0.00		
5f.	Domestic supp	ort obligations	5f.	\$0.00	\$0.00		
5g.	Union dues		5g.	\$0.00	\$0.00		
5h.	Other deduction	ons. Specify:	_ 5h. +	\$0.00 +	\$0.00		
6. <b>Add</b> +5h.	I the payroll de	<b>ductions.</b> Add lines 5a + 5b + 5c + 5d + 5e +5f	f + 5g 6.	\$35.32	\$284.29		
7. Cal	culate total mo	nthly take-home pay. Subtract line 6 from line	4. 7.	\$393.68	\$1,670.65		
8. List	all other incon	ne regularly received:					
8a.	business, profe	•					
		ent for each property and business showing ordinary and necessary business expenses, and					
	the total monthl	y net income.	8a.	\$0.00	\$0.00		
8b.	Interest and di	vidends	8b.	\$0.00	\$0.00		
8c.	dependent reg		a				
		s, spousal support, child support, maintenance, ent, and property settlement.	8c.	\$0.00	\$0.00		
8d.	Unemploymen	t compensation	8d.	\$0.00	\$0.00		
8e.	Social Security	,	8e.	\$0.00	\$0.00		
	Include cash ass cash assistance under the Suppl housing subsidi Specify:	ent assistance that you regularly receive sistance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es	8f.	\$0.00	\$0.00		
8g.	Pension or ret	irement income	8g.	\$0.00	\$0.00		
8h.	Other monthly	income. Specify: See attached	8h. +	\$0.00 +	\$804.27		
		<b>ne</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	⊦8h. 9.	\$0.00	\$804.27		
		r income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp	10. pouse	\$393.68 +	\$2,474.92	=	\$2,868.60
Inc frie	lude contribution nds or relatives.	gular contributions to the expenses that you as from an unmarried partner, members of your amounts already included in lines 2-10 or amounts.	household, your	dependents, your roomm			
Spe	ecify:					11. +	\$0.00
	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies						
		increase or decrease within the year after	•		а, п к аррпез		\$2,868.60 Combined monthly income
<b> </b>	No. Yes. Explain:						
	163. Explain.						

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Debtor 1Sylvia	E.	Palacios	Case number (if		
First Name	Middle Name	Last Name	known)		
Part 1: Describe Employme	ent				
	Debtor 1		Debtor 2		
Employment status	Employed		<b>✓</b> Employed		
	Not Employed		Not Employ	red	
Occupation					
Employer's name			Jewel Food Sto	res, Inc.	
Employer's address			2501-1 W Gran	dview Rd	
	Number Street		Number Street		
			Phoenix	Arizona	85023
	City	State Zip Code	City	State	Zip Code
How long employed there?					

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Debtor 1 Sylvia
First Name
Middle Name
Last Name
Middle Name
Last Name
Known)

Part 2: Give Details About Monthly Income

Official Form 1061. Additional page.

For Debtor 1

For Debtor 2 or non-filing spouse

8h.Other monthly income. Specify:

\$0.00

\$804.27

1. Jewel Food Stores, Inc.

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Fill in this infor	rmation to identify your c	ase.		
Debtor 1  Debtor 2 (Spouse, if filing)	Sylvia First Name Israel First Name Bankruptcy Court for the:	E. Middle Name  Middle Name	Palacios Last Name Ramos Last Name District of Illinois	Check if this is:  An amended filing  A supplement showing post-petition chapter 13 expenses as of the following date:
Case number (If known)			(State)	
Official	Form 106J			
Schedul	e J: Your Exp	enses		1
Be as complet	e and accurate as poss	ble. If two married people	e are filing together, both a	re equally responsible for supplying correct

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

(if known). Answer every quest	ion.	ionii. On the top of any additiona	r pages, write your n	anic and ca	se number		
Part 1: Describe Your Ho	usehold						
1. Is this a joint case?							
No. Go to line 2							
Yes. Does Debtor 2 live	e in a separate household?						
No							
Yes. Debtor 2	must file Official Forms 106J-2, Experi	nses for Separate Household of Debte	or 2.				
2. Do you have dependents?	<b>√</b> No						
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does der with you	pendent live ?		
3. Do your expenses include expenses of people other	<b>✓</b> No						
than yourself and your dependents?	Yes						
Part 2: Estimate Your On	going Monthly Expenses						
	your bankruptcy filing date unless y ne bankruptcy is filed. If this is a sup						
	h non-cash government assistance luded it on Schedule I: Your Income	-			Your expenses		
The rental or home owner     any rent for the ground or leading to the second or leading to	rship expenses for your residence. In ot. 4.	clude first mortgage payments and		4.	\$600.00		
If not included in line 4:							
4a. Real estate taxes 4a \$6							
4b. Property, homeowner's	4b. Property, homeowner's, or renter's insurance 4b. \$0.0						
4c. Home maintenance, rep	pair, and upkeep expenses			4c.	\$25.00		
4d. Homeowner's associati	ion or condominium dues	4d. Homeowner's association or condominium dues 4d. \$0.00					

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Debtor 1 Sylvia E. Palacios Case number (if known)
First Name Middle Name Last Name

	First Name Middle Name	Last Name		
Sea				Your expenses
6a. Electricity, heat, natural gas         6a.         \$300.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$225.00           6d. Other. Specify:         6d.         \$5.00           7. Food and housekeeping supplies         7.         \$640.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$125.00           10. Personal care products and services         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$25.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15. Insurance.         15.         \$0.00           15. Life insurance deducted from your pay or included in lines 4 or 20.         \$0.00           15. Life insurance.         15.         \$0.00           15. Caverable insurance. <td>5. Additional mortgage payments for your residence, suc</td> <td>ch as home equity loans</td> <td>5.</td> <td>\$0.00</td>	5. Additional mortgage payments for your residence, suc	ch as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$225.00           6d. Other, Specify:         7.         \$640.00           7. Food and housekceping supplies         7.         \$640.00           8. Childcare and children's education costs         8.         \$0.00           9. Citothing, laundry, and dry cleaning         9.         \$125.00           10. Personal care products and services         11.         \$25.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$250.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         156         \$0.00           15c. Vehicle insurance         156         \$0.00           15c. Vehicle insurance         156         \$0.00           15c. Taxes Do not include taxes deducted from your pay or included in line	6. Utilities:			
6c. Telephone, cell phone, linternet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 7. Food and housekeeping supplies 8. \$0.00 7. Food and housekeeping supplies 8. \$1. Schildcare and children's education costs 8. \$1. Schildcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$125.00 10. Personal care products and services 11. \$25.00 11. Medical and dental expenses 11. \$25.00 11. Medical and dental expenses 12. \$250.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 15. Life insurance 15. Life insurance 15. Let insurance 15. Let insurance 15. Let insurance 15. Let insurance 15. Cybricial insurance deducted from your pay or included in lines 4 or 20. 15. Cybricial insurance 15. Let insurance 15. Cybricial insurance 16. Syo.00 17. Cybricial insurance 17. Installment or lease payments: 17. Installment or lease payments 17. Car payments for Vehicle 1 17. Cybricial insurance 18. Syo.00 19. Cybricial insurance 19. Syo.00 19. Cybricial insurance 19. Syo.00 19. Cybricial insurance 19. Syo.00 19. Cybricial insurance 20. Montgages on other property 20. Specify: 20. Speci	6a. Electricity, heat, natural gas		6a.	\$300.00
6d. Other. Specify:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$64.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$125.00           10. Personal care products and services         10.         \$125.00           11. Medical and dental expenses         11.         \$25.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$250.00           10. not nickude car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance         15b. \$0.00           15b. Health insurance         15c         \$113.00           15c. Vehicle insurance.         15c         \$113.00           15c. Vehicle insurance.         15c         \$0.00           15c. Vehicle insurance.         15c         \$0.00           15c. Taxes. Do not included taxes deducted from your pay or included in lines 4 or 20.         \$	6b. Water, sewer, garbage collection		6b.	\$0.00
7. Food and housekeeping supplies       7. \$440,00         8. Childcare and childcare's education costs       8. \$0.00         9. Clothing, laundry, and dry cleaning       9. \$125,00         10. Personal care products and services       10. \$125,00         11. Medical and dental expenses       11. \$25,00         12. Transportation. Include gas, maintenance, bus or train fare.       12. \$250,00         20. not include car payments       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       15a       \$0.00         15b. Insurance       15a       \$0.00         15c. Utelial insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance       15a       \$0.00         15c. Utelial insurance.       15a       \$0.00         15c. Vehicle insurance.       15a       \$0.00         15c. Vehicle insurance.       15a       \$0.00         15c. Vehicle insurance. Specify:       15a </td <td>6c. Telephone, cell phone, Internet, satellite, and cable set</td> <td>rvices</td> <td>6c.</td> <td>\$225.00</td>	6c. Telephone, cell phone, Internet, satellite, and cable set	rvices	6c.	\$225.00
8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$125.00 10. Personal care products and services 11. \$25.00 11. Medical and dental expenses 11. \$25.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17c. Car payments for Vehicle 1 17c. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify:	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning       9. \$125.00         10. Personal care products and services       10. \$125.00         11. Medical and dental expenses       11. \$25.00         12. Transportation, Include gas, maintenance, bus or train fare.       12. \$250.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       0         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance         15b. Health insurance       15b       \$0.00         15c. Vehicle insurance.       15c       \$113.00         15c. Vehicle insurance.       15c       \$0.00         15c. Vehicle insurance.       15c       \$0.00         15c. Vehicle insurance.       15c       \$0.00         15c. Vehicle insurance       15c       \$0.00         15c. Vehicle insurance       15c       \$0.00         15c. Vehicle insurance       15c       \$	7. Food and housekeeping supplies		7.	\$640.00
10. Personal care products and services       10.       \$125.00         11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare.       12.       \$250.00         Do not include car payments       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15b. Health insurance       15b. \$0.00       \$0.00         15c. Vehicle insurance       15c. \$113.00       \$0.00         15c. Vehicle insurance.       15c. \$113.00       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17b. Carpayments f	8. Childcare and children's education costs		8.	\$0.00
11. Medical and dental expenses       11.       \$25.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$250.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15b. Health insurance       15a.       \$0.00	9. Clothing, laundry, and dry cleaning		9.	\$125.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$250.00	10. Personal care products and services		10.	\$125.00
Do not include car payments   13.   13.   13.   13.   13.   13.   13.   13.   13.   14.   14.   14.   14.   14.   14.   15.   14.   15.   14.   14.   14.   14.   14.   14.   14.   14.   15.   14.	11. Medical and dental expenses		11.	\$25.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       50.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15b. Lefaith insurance       15b. \$0.00       15b. \$0.00         15c. Vehicle insurance       15c. \$113.00       \$0.00         15d. Other insurance. Specify:       15d. \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$9.00         Specify:       16         17. Installment or lease payments:       17a. \$0.00         17b. Car payments for Vehicle 1       17a. \$0.00         17c. Other. Specify:       17c. \$0.00         17c. Other. Specify:       17c. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upke		fare.	12.	\$250.00
15. Insurance.	13. Entertainment, clubs, recreation, newspapers, maga	zines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance   15a   \$0.00 15b. Health insurance   15b   \$0.00 15c. Vehicle insurance   15c   \$113.00 15c   \$113.00 15d   \$0.00 15d. Other insurance. Specify:   15d   \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	14. Charitable contributions and religious donations		14.	\$0.00
15b		ided in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
Specify:			15c	\$113.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes deducted from your pay or i	ncluded in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. S0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. \$0.00  17d. Other. Specify:  17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	17. Installment or lease payments:			
17c. Other. Specify:	17a. Car payments for Vehicle 1		17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle 2		17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20b. \$0.00  20c. Property, homeowner's, or renter's insurance  20c. \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00				\$0.00
Specify:		,	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		not live with you.	10	<b>\$0.00</b>
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		or 5 of this form or on Schedule I: Your Income	19.	\$0.00
20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. So.00 20d. Maintenance, repair, and upkeep expenses.			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's, or renter's insurance			
	20d. Maintenance, repair, and upkeep expenses.			
	20e. Homeowner's association or condominium dues		20e	\$0.00

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Debtor 1 Sylv		E.	Palacios	Case number (if known)		
	Name	Middle Name	Last Name			
21. <b>Other.</b> Sp	ecify:				21	\$0.00
	e your monthly expenses.					\$2,428.00
	lines 4 through 21.					\$0.00
	/ line 22 (monthly expenses	,,				\$2,428.00
	line 22a and 22b. The resul		enses.		22.	
23. Calculate	your monthly net income	).				
23a. Copy	line 12 (your combined mo	onthly income) from	Schedule I.		23a	\$2,868.60
23b. Copy	y your monthly expenses fro	om line 22 above.			23b	\$2,428.00
	ract your monthly expenses		ncome.			\$440.60
The	result is your monthly net in	come.			23c	
	ple, do you expect to finishe payment to increase or de					

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Sylvia	E.	Palacios
	First Name	Middle Name	Last Name
Debtor 2	Israel		Ramos
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Illinois (State)
Case number			(Otato)

### Official Form 106Dec

Check if this is an
amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below		
	Did you pay or agree to pay someone who is NOT an attorney to h	help you fill	out bankruptcy forms?
	✓ No		
	Yes. Name of person		okruptcy Petition Preparer's Notice, Declaration, and Official Form 119).
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedu	les filed with this declaration and
4	•	4.0	
X	/s/ Sylvia Palacios	×	/s/ Israel Ramos
	Signature of Debtor 1		Signature of Debtor 2
	Date 1/5/2018		Date 1/5/2018
	MM/DD/YYYY		MM/DD/YYYY

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Fill in this info	ormation to identify yo	ur case:					
Debtor 1	Sylvia	E.	Palacios		_		
	First Name	Middl	e Name Last Nam	е			
Debtor 2 (Spouse, if filing)	Israel First Name	Middl	Ramos e Name Last Nam	Α	-		
United States	Bankruptcy Court for t	he: <u>Northern</u>	District of Illino (Stat		-		
Case numbe			(0.00)		_		
(If known)							Check if this is
Official	Form 107						amended filing
		sial Affaira	for Individuals	Eilina fo	r Donkri	ıntov	0.4
			for Individuals				04
			married people are filing to eparate sheet to this form				
	nown). Answer ever		parate sneet to this form	. On the top t	or arry additio	mai pages, winte	e your name and case
		, 4					
Part 1: Giv	e Details About Yo	our Marital Statu	is and Where You Lived	Before			
4 147							
1. What i	s your current marita	i status?					
<b>✓</b> M	arried						
	arried ot married						
N	ot married						
N	ot married	e you lived anywhe	ere other than where you liv	/e now?			
N	ot married	e you lived anywhe	ere other than where you liv	ve now?			
2. During	ot married the last 3 years, have		ere other than where you liv ast 3 years. Do not include v		now.		
2. During	ot married the last 3 years, have				now.		
2. During	ot married the last 3 years, have				now.		Dates Debtor 2 lived
2. During	ot married  the last 3 years, have  oes. List all of the place		ast 3 years. Do not include v	where you live	now.		Dates Debtor 2 lived there
2. During	ot married  the last 3 years, have  oes. List all of the place		ast 3 years. Do not include v	where you live  Debtor 2:			there
2. During	ot married  the last 3 years, have  oes. List all of the place		ast 3 years. Do not include v	where you live  Debtor 2:	now. as Debtor 1		
2. During  N  Y  D	ot married  the last 3 years, have  ses. List all of the place  ebtor 1:		Dates Debtor 1 lived there	Debtor 2:	as Debtor 1		there  Same as Debtor 1
2. During  N  Y  D	ot married  the last 3 years, have  oes. List all of the place		Dates Debtor 1 lived there	where you live  Debtor 2:	as Debtor 1		Same as Debtor 1 From
2. During  N  Y  D	ot married  the last 3 years, have  ses. List all of the place  ebtor 1:		Dates Debtor 1 lived there	Debtor 2:	as Debtor 1		there  Same as Debtor 1
2. During  N  Y  D	ot married  the last 3 years, have  sees. List all of the place  bettor 1:	s you lived in the k	Dates Debtor 1 lived there	Debtor 2:  Same a	as Debtor 1 reet	Zip Code	Same as Debtor 1 From
2. During  N  Y  D	ot married  the last 3 years, have  ses. List all of the place  ebtor 1:		Dates Debtor 1 lived there	Debtor 2:  Same a  Number Str	eet State	Zip Code	Same as Debtor 1  From To
2. During  N  Y  D	ot married  the last 3 years, have  sees. List all of the place  bettor 1:	s you lived in the k	Dates Debtor 1 lived there	Debtor 2:  Same a  Number Str	as Debtor 1 reet	Zip Code	Same as Debtor 1 From
2. During  N  Y  D	the last 3 years, have the last 4 years, have	s you lived in the k	Dates Debtor 1 lived there  From To	Debtor 2:  Same a  Number Str  City  Same a	eet State as Debtor 1	Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1
2. During  N  Y  D	ot married  the last 3 years, have  sees. List all of the place  bettor 1:	s you lived in the k	Dates Debtor 1 lived there  From To	Debtor 2:  Same a  Number Str	eet State as Debtor 1	Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1  From
2. During  N  Y  D	the last 3 years, have the last 4 years, have	s you lived in the k	Dates Debtor 1 lived there  From To	Debtor 2:  Same a  Number Str  City  Same a	eet State as Debtor 1	Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1
During N  2. During N  Y  D	ot married  the last 3 years, have  es. List all of the place  ebtor 1:  umber Street  ty State	s you lived in the k	Dates Debtor 1 lived there  From To	Debtor 2:  Same a  Number Str  City  Same a	eet State as Debtor 1	Zip Code	there  Same as Debtor 1  From To  Same as Debtor 1  From

**✓** No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Palacios

E.

Debtor 1		Palacios		umber (if known)		
	First Name Middle	e Name Last Nam	ne			
art 2:	Explain the Sources of Your Inc	come				
Fill	you have any income from employm in the total amount of income you receivities. If you are filing a joint case and you No Yes. Fill in the details.	ved from all jobs and all busir	nesses, including part-time		ars?	
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business		Wages, commissions, bonuses, tips Operating a business		
	or last calendar year: lanuary 1 to December 31, 2017 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$10000.00	Wages, commissions, bonuses, tips Operating a business		
	or the calendar year before that: lanuary 1 to December 31, 2016 ) YYYY	Wages, commissions, bonuses, tips  ☐ Operating a business	\$3000.00	Wages, commissions, bonuses, tips Operating a business		
pub filing	ude income regardless of whether that in lic benefit payments; pensions; rental in g a joint case and you have income that each source and the gross income from No Yes. Fill in the details.	come; interest; dividends; mo you received together, list it on each source separately. Do	oney collected from lawsuits; only once under Debtor 1.	royalties; and gambling and lot listed in line 4.		
		Debtor 1		Debtor 2		
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
	From January 1 of current year until he date you filed for bankruptcy:	Est Link	\$1,164.00			
	For last calendar year: January 1 to December 31, 2017 ) YYYY	Est Link	\$1,164.00			
	For the calendar year before that:  January 1 to December 31, 2016 )  YYYY	Est Link	\$1,164.00			

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Palacios Debtor 1 Sylvia Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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or 1	Sylvia		E.	Pa	lacios	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi com age	ders include your porations of which	relatives; a n you are a for a busin	ny general partner n officer, director, ess you operate a	s; relatives of any person in control,	general partners; par or owner of 20% or	tnerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
<b>✓</b>	No						
	Yes. List all pay	ments to a	an insider.	Dates of	Total amount	Amount you	Reason for this payment
				payment	paid	still owe	
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	-						
	City	State	Zip Code				
	No		ranteed or cosigne	·	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Palacios Debtor 1 Sylvia Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1	Sylvia First Name		E. Middle Name	Palacios Last Name	Case number (if known)		
11.		ounts or refuse to	make a pay	r bankruptcy, did a ment because you		a bank or financial institution,	set off any amoui	nts from your
	Ш	Yes. Fill in the deta	ails.		Describe the action	the creditor took	Date action	Amount
							was taken	
		Creditor's Name						
		Number Street						
					Last 4 digits of accour	nt number: XXXX-		
		City	State	Zip Code				
12.		nin 1 year before yo ointed receiver, a o			y of your property in th	e possession of an assignee fo	r the benefit of c	reditors, a court-
	<b>✓</b>	No Yes						
Part	5:	List Certain Gifts	s and Cont	ributions				
13.	Wit	thin 2 years before  No Yes. Fill in the det			ou give any gifts with a	total value of more than \$600	per person?	
		Gifts with a total per person	value of mo	re than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom Yo	ou Gava tha	Ciff				
		——————————————————————————————————————	ou Gave me					
		Number Street						
		City	State	Zip Code				
		Person's relationshi	ip to you 					
		Person to Whom Ye	ou Gave the	Gift				
		Number Street						
		,	State	Zip Code				
		Person's relationshi	ip to you					

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ebtor 1	Sylvia	E.	Palacios	Case number (if know	vn)	
	First Name	Middle Name	Last Name		·	
. Wi	thin 2 years before you f	filed for bankruptcy, die	d you give any gifts or contribut	tions with a total value	of more than \$600	to any charity?
	No					
✓	ı					
L	Yes. Fill in the details to	or each gift or contribut	tion.			
	Gifts or contributions	to charities	Describe what you contril	buted	Date you	Value
	that total more than \$	600			contributed	
	Charity's Name		_			
	Chanty's Name					
			-			
	Number Street		_			
	Number Street					
	City State	e Zip Code	<del>-</del>			
	Oity	c zip codc				
rt 6·	List Certain Losses					
<b>✓</b>	No Yes. Fill in the details.					
	Describe the property	-	Describe any insurance c		Date of your	Value of property
	how the loss occurred		Include the amount that ins		loss	lost
			pending insurance claims o A/B: Property.	n line 33 of <i>Scheaule</i>		
			жь. гюрену.			
	List Certain Paymer	ata au Tuanafana				
	No		or credit counseling agencies for s			
<b>✓</b>	Yes. Fill in the details.					
	•		Description and value of a	inv property	Date payment	Amount of
			transferred	,,	or transfer	payment
					was made	
	Semrad Law Firm		Attorney's Fee - 350.00		1/5/2018	\$350.00
	Person Who Was Paid		_			
	20 S. Clark Street					
	Number Street					
	28th Floor					
	•		-			
	Chicago Illino		_			
	City State	e Zip Code				
	Email or website addres	S	_			
			_			
	Person Who Made the F	Dec 2 15 Mart 1/acc	_			
		ayment, if Not You				
		Payment, if Not You				
	Person Who Was Paid	Payment, if Not You	_			
	Person Who Was Paid	Payment, ii Not You	-			
	Person Who Was Paid  Number Street	Payment, if Not You	-			
		Payment, if Not You	-			
		Payment, if Not You	-			
	Number Street		-			
			-			
	Number Street	e Zip Code	-			
	Number Street  City State	e Zip Code	- - -			

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Deb		Sylvia First Name	E. Middle Name	Palacios Cas Last Name	e number <i>(if known)</i>			
17.	help	hin 1 year before you filed for p you deal with your creditors not include any payment or trans  No  Yes. Fill in the details.	or to make payment		f pay or transfer	any property to ar	iyone who pr	omised to
		res. I ill ill tile details.		Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of p	ayment
		Person Who Was Paid  Number Street						
		City State	Zip Code					
18.	the Incl	ordinary course of your busin	ess or financial affair transfers made as secu	rity (such as the granting of a security				
				Description and value of property transferred	Describe any payments re in exchange	/ property or ceived or debts pa	Date trans made	sfer was
		Person Who Received Transfer  Number Street						
		City State Person's relationship to you	Zip Code					
		Person Who Received Transfer						_
		City State Person's relationship to you	Zip Code					
19.	ben	hin 10 years before you filed for the ficiary? The ease are often called asset-protect No Yes. Fill in the details.		ou transfer any property to a self-set	tled trust or sim	ilar device of whic	h you are a	
	_			Description and value of the prop	erty transferred		Date trans made	efer was
		Name of trust						

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**Palacios** Debtor 1 Sylvia Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Bank of America Checking XXXX-0000 07/2017 \$ -389.00 Person Who Was Paid Savings P.O. Box 25118 Number Street Money market Brokerage Florida 33622 Tampa Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street City State Zip Code City State Zip Code

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**Palacios** Debtor 1 Sylvia Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt		Sylvia		E.	Palacios	Case	number (if	known)		
		First Name		Middle Name	Last Name					
26.	Hav	e you been a part	y in any judio	cial or adminis	trative proceeding unde	r any environment	al law? In	clude settlements a	and orders	<b>.</b>
		Yes. Fill in the det	tails.							
					Court or agency		Nature o	of the case		Status of the case
		Case title								Pending
					Court Name					On appeal
		Case number			NumberStreet					Concluded
		_			City State	Zip Code				
Part	11:	Give Details Al	bout Your E	Business or C	Connections to Any Bu	usiness				
27.	Witl	nin 4 years before	you filed for	bankruptcy, di	id you own a business o	r have any of the fo	ollowing c	onnections to any b	usiness?	
		A sole propri	ietor or self-e	employed in a ti	rade, profession, or othe	er activity, either ful	I-time or p	oart-time		
					(LLC) or limited liability p	artnership (LLP)				
		A partner in a	-							
		_			ive of a corporation					
		An owner of	at least 5% o	of the voting or	equity securities of a co	rporation				
	<b>V</b>	No. None of the a	above applie	es. Go to Part 1	2.					
	Ħ				e details below for each	business.				
	ш		,,,			ture of the busines	s	Employer Identific	cation nur	nber Do not
								include Social Se		
		Design News						EIN:		
		Business Name								
		Number Street						Dates business ex	kisted	
		0	2: :		Name of accoun	tant or bookkeepe	r			
		City	State	Zip Code				FromT	Го	
					Describe the nat	ture of the busines	S	Employer Identific		
		Business Name						EIN:		
		Number Street						Dates business ex	risted	
		Number Street			Name of accoun	tant or bookkeepe	r	Dates Dusiness ex	docu	
		City	State	Zip Code				From T	Го	
					Describe the nat	ture of the busines:	s	Employer Identific include Social Se		
								EIN:		
		Business Name								
		Number Street			Name of accoun	tant or heakkeens	r	Dates business ex	cisted	
		City	State	Zip Code		tant or bookkeepe	•	FromT	Го	
		,		F - 2 0 0 0				. 101111		

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Deb	otor 1 Sylvia	E.	Palacios	Case number (if known)
	First Name	Middle Name	Last Name	
28.	Within 2 years before you file creditors, or other parties.	ed for bankruptcy, did y	ou give a financial statement to	o anyone about your business? Include all financial institutions,
	Yes. Fill in the details be	low.		
	_		Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	011	7: 0 1	<u> </u>	
	City State	e Zip Code		
Par	t 12: Sign Below			
1	true and correct. I understand	l that making a false sta in fines up to \$250,000,	atement, concealing property, o	, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /*/ /s/
	Signature of D			Signature of Debtor 2
	Date 1/5/20	18		Date 1/5/2018
ı	Did you attach additional pag	es to Your Statement o	f Financial Affairs for Individuals	s Filing for Bankruptcy (Official Form 107)?
   	✓ No Yes			
ı	Did you pay or agree to pay so	omeone who is not an a	ttorney to help you fill out bank	ruptcy forms?
	<b>✓</b> No			
i	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois					
In re Sylvia E. Palacios ; Israel Ramos Case No.					
Debtor	(If known)				
Chapter _	Chapter 13				
DISCLOSURE OF COMPENSATION OF ATTORNE	Y FOR DEBTOR				
<ol> <li>Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the compensation paid to me within one year before the filing of the petition in bankruptcy, or agr rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with</li> </ol>	reed to be paid to me, for services				
For legal services, I have agreed to accept	\$4,000.00				
Prior to the filing of this statement I have received	\$350.00				
Balance Due	\$3,650.00				
2. The source of the compensation paid to me was:					
Debtor Other (specify)					
3. The source of the compensation paid to me is:					
Debtor Other (specify)					
4. I have not agreed to share the above-disclosed compensation with any other person unless members and associates of my law firm.	ss they are				
	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.				
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the	e bankruptcy case, including:				
<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in deter bankruptcy;</li> </ul>	mining whether to file a petition in				
b. Preparation and filing of any petition, schedules, statements of affairs and plan which	may be required;				
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and	d any adjourned hearings thereof;				
d. Representation of the debtor in adversary proceedings and other contested bankrupto	y matters;				
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service	ces:				
CERTIFICATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for paymer debtor(s) in this bankruptcy proceedings.	nt to me for representation of the				
1/5/2018 /s/ Jason Diaz					
Date Signature of Attorney					
Semrad Law Firm					
Name of law firm					

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
'	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

In re:	Palacios, Sylvia E.; Ramos, Israel	Case No	
	Debtor(s)	0.000 1.001	
		Chapter.	Chapter13
	VERIFICATIO	N OF CREDITOR MA	TRIX
Ti nowledge	he above named Debtors hereby verify that the	e attached list of creditors is t	true and correct to the best of their
ate:	1/5/2018	/s/ Palacios, Sy	lvia E.
		Palacios, Sylvia Signature of De	
		/s/ Ramos, Isra	nel
		Ramos, Israel Signature of Jo	oint Debtor

ILLINOIS DCFS 509 S 6TH ST SPRINGFIELD, IL, 62701

TTL FIN AC 4530 S Archer Ave Chicago, IL, 60632

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA, KS, 67205

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

IL DEPT OF HEALTHCARE c/o Margaret Flores 509 S 6th St Springfield, IL, 62701

Municipal Services Bureau PO Box 16755 Austin, TX, 78761

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Peoples Gas Light & Coke Co. 200 E. Randolph St. Chicago, IL, 60601

Norwegian American Hospital 1044 N Francisco Ave Chicago, IL, 60622 St Elizabeth Hospital 1431 N Western Ave Chicago, IL, 60622

St Marys Hospital 5401 Lake Oconee Parkway Greensboro, GA, 30642

Presence Saint Joseph Medical Center 1643 Lewis Ave Ste 203 Billings, MT, 59102

Rush Medical 1700 W Van Buren Chicago, IL, 60612

Sprint Corp. PO Box 7949 Attn: Bankruptcy Dept. c/o Jake Rattmann Overland Park, KS, 66207

American InfoSource LP as agent for Directv, LLC 4515 N Santa Fe Ave Attn: Ashley Boswell Oklahoma City, OK, 73118

Dish Network PO Box 530714 Atlanta, GA, 30353

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case,
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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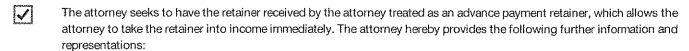
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$391.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$81.76 for expenses, leaving a balance due of \$4,041.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 1/5/2018	
Signed:	
/s/ Sylvia Palacios Sylva Jalleces	
/s/ Israel Ramos Peral Lamy	/s/ Jason Diaz
Debtor(s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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Debtor 1 Sylvia First Name	E. Middle Name	Palacios Last Name	Case number (if know	n)
V 700 S A S A S A S A S A S A S A S A S A S	estions for Reporting Purpos			
16. What kind of debts do you have?	"incurred by an individue No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primar	ual primarily for a perso i <b>ly business debts?</b> <i>Bu</i> r investment or through	nal, family, or house vsiness debts are deb n the operation of the	ots that you incurred to obtain e business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid tha		t after any exempt pro o distribute to unsecure	perty is excluded and administrative ed creditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,00 5,001-10,0 10,001-25	000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	丁 \$10,000,00 □ \$50,000,00	1-\$10 million 01-\$50 million 01-\$100 million 001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
<sup>20</sup> · How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,00 \$50,000,00	-\$10 million 91-\$50 million 91-\$100 million 901-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part A Sign Below				
	correct.  If I have chosen to file under Coof title 11, United States Code under Chapter 7.  If no attorney represents me arout this document, I have obtain I request relief in accordance voluments and making a false st connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341.  **  /s/ Sylvia Palacio* Signature of Debter 1	Chapter 7, I am aware the lunderstand the relied and I did not pay or agreed and and read the notice with the chapter of title atement, concealing procase can result in finest	that I may proceed, if each of available under each each each each each each each each	ode, specified in this petition. money or property by fraud in imprisonment for up to 20 years, or amos when the second s
	Executed on 1/5/2018 MM / D	D / YYYY	Executed or	1/5/2018 MM / DD / YYYY

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Fill in this infor	nation to identify your c	ase)			
Debtor 1	Sylvia	Ε.	Palacios	and the company of th	
	First Name	Middle Name	Last Name	<del></del>	
Debtor 2	Israel		Ramos		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					
Official	Form 106De				Check if this is a
Omoran	OIII TOODE	<u>:C</u>			arnended filing
Declarati	on About an	Individual Deb	tor's Schedules		12/1
If two married p	eople are filing togeth	er, both are equally respo	nsible for supplying correct	information	
nonev or prope	us form whenever you t rtv by fraud in connect	ile bankruptcy schedules	or amended schedules. Mai	king a false statement, concealing pro 250,000, or imprisonment for up to 20	perty, or obtaining
U.S.C. §§ 152, 1	341, 1519, and 3571.	ion with a parkingtey cas	se can result in lines up to 3	250,000, or imprisonment for up to 20	years, or both. 18
Raittie Sign	Below				
And the second s					
Did you pa	y or agree to pay some	one who is NOT an attorn	ey to help you fill out bankr	ruptcy forms?	
No					
good Yac N	ame of person		Address Marshall Mars		
in the second	anc or person		Signature (Official For	etition Preparer's Notice, Declaration, and mn 119).	
				•	
Under pen	alty of perjury, I declare	e that I have read the sun	mary and schedules filed w	ith this declaration and	
that they a	ire true and correct.	w <sup>a</sup>			
🗴 /s/ Sylvia	Palacio	Zin Rale	Clarie 🗶 /s/ Israel	Bamos	Direct D

Signature of Debfor 2

MM/DD/YYYY

Date 1/5/2018

Signature of Debtor

MM/DD/YYYY

Date 1/5/2018

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Debtor 1	Sylvia First Name	E. Middle Name	Palacios Last Namo	Case number (It known)
28. Wi	thin 2 years before yeditors, or other par	ou filed for bankruptcy, did ties.	you give a financial state	nent to anyone about your business? Include all financial institutions,
	No Yes. Fill in the deta	ils below.		
Computer	•		Date issued	
	Name		MM/DD/YYYY	<del></del>
	Number Street			
	City	State Zip Code	_	
Part 12	Sign Below			
true	and correct. I under nkruptcy case can r	rstand that making a false st esult in fines up to \$250,000 ylvia Palacios	atement, concealing proj	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signatu	re of Debtor +		Signature of Debtor 2
	Date 1	/5/2018		Date 1/5/2018
Did y	ou attach additiona	I pages to Your Statement o	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
Samuel S	No Yes			
Did y	ou pay or agree to p	pay someone who is not an a	ttorney to help you fill ou	t bankruptcy forms?
	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

In re:	Palacios, Sylvia E.; Ramos, Israel	Case No	
	Debtor(s)		**************************************
		Chapter.	Chapter13
	VERIFIC	CATION OF CREDITOR MAT	RIX
T knowledg	he above named Debtors hereby verify e.	that the attached list of creditors is tru	ue and correct to the best of their
Date:	1/5/2018	/s/ Palacios, Sylvia Palacios, Sylvia E. Signature of Debt	. 77
		/s/ Ramos, Israel Ramos, Israel Signature of Joint	Servel ones

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Debt	or 1 Sylvia First Name	E. Middle Name	Palacios Last Name	Case number (if known)		
16.	Calculate the median fan	nily income that applies to y	ou. Follow these ste	ps:		
	16a. Fill in the state in which		Illinois		,	
	16b. Fill in the number of p	eople in your household.	2		:	
	household using the link specified		To fi	nd a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office.	\$67,254.00	
17.	How do the lines compare					
	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).					
	17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.					
Parit	Galculate Your Cor	mmitment Period Under	I1 U.S.C. §1325(	b)(4)		
18.	<del>-</del>	monthly income from line 11.	er and the entertainment of the		\$1,566.17	
19.	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.					
	19a. If the marital adjustment does not apply, fill in 0 on line 19a.				-\$0.00	
	19b. Subtract line 19a from line 18.				\$1,566.17	
20.	Calculate your current monthly income for the year. Follow these steps:				W	
	20a. Copy line 19b.	mber of months in a year).			\$1,566.17	
		,	rfarthic nart of the t	to m	<b>x 12</b> \$18,794.04	
	20b. The result is your current monthly income for the year for this part of the form.				310,794.04	
	20c. Copy the median family income for your state and size of household from line 16c.				\$67,254.00	
21.	low do the lines compare?					
	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.					
	Line 20b is more than a 4. The commitment pe	or equal to line 20c. Unless oth riod is 5 years. Go to Part 4.	erwise ordered by th	e court, on the top of page 1 of this form, check box		
Part	วิลิชิร์ Sign Below					
	By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  * /s/ Sylvia Palacios*					
	Signature of Debtor 1 Signature of Debtor 2 Signature of Debtor 2					
	Date 1/5/2018 MM/DD/YYY	Ÿ		Date 1/5/2018 MM/DD/YYYY		
	If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.					